

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (*if only one name is listed below*) or an original, first and joint inventor (*if plural names are listed below*) of the subject matter which is claimed and for which a patent is sought on the invention entitled METHOD AND APPARATUS FOR GENERATING ELECTRICAL ENERGY, the specification of which:

(check one) is attached hereto was filed on _____ as
Application Serial No. _____ and
was amended on _____
(*if applicable*)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)	Priority Claimed
_____	<input type="checkbox"/> <input type="checkbox"/>
(NUMBER)	(COUNTRY)
	(DAY/MONTH/YEAR FILED) YES NO

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §156(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this applications:

(APPLICATION SERIAL NO.)	(FILING DATE)	(STATUS)
		(PATENTED, PENDING, ABANDONED)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorneys and/or agents to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Leonard W. Sherman	Reg. No. 19,636	Karl Hoback	Reg. No. 23,026
Edwin A. Shalloway	Reg. No. 19,967	Robert L. Haines	Reg. No. 35,533
Richard A. Steinberg	Reg. No. 26,588		
Perry Carvellas	Reg. No. 19,637		

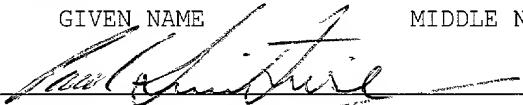
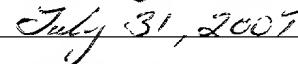
SEND CORRESPONDENCE TO:

SHERMAN & SHALLOWAY
413 North Washington Street
Alexandria, Virginia 22314

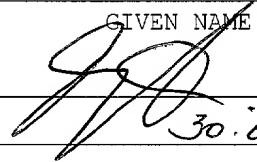
DIRECT TELEPHONE CALLS TO:

(703) 549-2282

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or document or any patent issuing thereon.

Full name of sole or first inventor	Paul	GIVEN NAME	MIDDLE NAME	Leitner-Wise	FAMILY NAME
Inventor's signature					.
Date of signature					.
Residence	Alexandria	CITY	Virginia	USA	COUNTRY
Citizenship	Great Britain				
Post Office Address	312 Lamonde Place, Alexandria, VA 22314, U.S.A.				

(insert complete mailing address, including country)

Full name of second inventor	Richard	GIVEN NAME	Peter	West	FAMILY NAME
Inventor's signature					.
Date of signature	30.07.01				.
Residence	Hatfield	CITY	Hertfordshire	England	COUNTRY
Citizenship	Great Britain				
Post Office Address	126 Great North Road, Hatfield, Hertfordshire, England				
(insert complete mailing address, including country)					

Full name of third Inventor	GIVEN NAME	MIDDLE NAME	FAMILY NAME
-----------------------------	------------	-------------	-------------

Inventor's signature			
Date of signature			
Residence	CITY	STATE OR PROVINCE	COUNTRY

Citizenship			
Post Office Address			
(insert complete mailing address, including country)			